

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
HEALTH AND RECOVERY SERVICES ADMINISTRATION  
Olympia, Washington**

**To:** Optometrists  
Opticians  
Managed Care Organizations

**Memorandum No: 06-62**  
**Issued:** June 29, 2006

**From:** Douglas Porter, Assistant Secretary  
Health and Recovery Services  
Administration (HRSA)

**For information, contact:**  
800.562-6188  
<http://maa.dshs.wa.gov/contact/prucontact.asp>

**Subject: Vision Care: Policy and Fee Schedule Updates**

**Effective for dates of service on and after July 1, 2006**, the Health and Recovery Services Administration (HRSA) will implement:

- The updated Medicare Physician Fee Schedule Data Base (MPFSDB) Year 2006 relative value units (RVUs);
- A one percent (1%) vendor rate increase; and
- Policy updates.

## **Maximum Allowable Fees**

HRSA is updating the Vision Care Program fee schedule with Year 2006 RVUs. The 2006 Washington State Legislature appropriated a one percent (1%) vendor rate increase for the 2007 state fiscal year. The maximum allowable fees have been adjusted to reflect these changes.

Visit HRSA's web site at <http://maa.dshs.wa.gov>. To view a current fee schedule, click ***Provider Publications/Fee Schedules***, then ***Accept***, then ***Fee Schedules***.

Bill HRSA your usual and customary charge.

## **Policy Updates**

Effective for dates of service on and after July 1, 2006, HRSA will **not** reimburse providers for the following two procedure codes when billed in combination: 92370 and 92371.

## Place of Service

**Reminder: Effective July 1, 2006**, all claims submitted to the HRSA must include the appropriate Medicare **two-digit place of service code**. Claims with a single-digit place of service code will be denied.

## National Correct Coding Initiative

HRSA continues to implement the National Correct Coding Initiative (NCCI) policy. The Centers for Medicare and Medicaid Services (CMS) created this policy to promote national correct coding methods. NCCI assists HRSA to control improper coding that may lead to inappropriate payment. HRSA bases coding policies on:

- The American Medical Association's (AMA) Current Procedural Terminology (CPT®) manual;
- National and local policies and edits;
- Coding guidelines developed by national professional societies;
- The analysis and review of standard medical and surgical practices; and
- Review of current coding practices.

HRSA may perform a post-pay review on any claim to ensure compliance with NCCI. Visit the NCCI on the web at <http://www.cms.hhs.gov/physicians/cciedits>.

## Billing Instructions Replacement Pages

Attached are updated pages C.5 – C.6, replacement fee schedule pages and new appendix for HRSA's current *Vision Care Services Billing Instructions*.

## How do I conduct business electronically with HRSA?

You may conduct business electronically with HRSA by accessing the WAMedWeb at <http://wamedweb.acs-inc.com>.

## How can I get HRSA's provider documents?

To obtain HRSA's provider numbered memoranda and billing instructions, go to HRSA's website at <http://maa.dshs.wa.gov> (click on the ***Billing Instructions/Numbered Memoranda*** or ***Provider Publications/Fee Schedules*** link).

To request a free paper copy from the Department of Printing:

1. **Go to:** <http://www.prt.wa.gov/> (Orders filled daily.)
  - a) Click ***General Store***.
  - b) If a **Security Alert** screen is displayed, click **OK**.
    - i. Select either ***I'm New*** or ***Been Here***.
    - ii. If new, fill out the registration and click ***Register***.
    - iii. If returning, type your email and password and then click ***Login***.
  - c) At the **Store Lobby** screen, click ***Shop by Agency***. Select ***Department of Social and Health Services*** and then select ***Health and Recovery Services Administration***.
  - d) Select ***Billing Instructions, Forms, Healthy Options, Numbered Memo, Publications, or Document Correction***. You will then need to select a year and then select the item by number and title.
2. **Fax/Call:** Dept. of Printing/Attn: Fulfillment at FAX 360.586.6361/telephone 360.586.6360. (Orders may take up to 2 weeks to fill.)



## Replacement Frames and/or Lenses [Refer to WAC 388-544-0300 (6)]

HRSA covers replacement eyeglass frames and/or lenses that have been lost or broken. To receive payment:

- For **adults** (clients 21 years of age or older) providers must follow the expedited prior authorization process (see Section D – *Authorization EPA# 615, EPA# 618*);
- For **children** (clients 20 years of age or younger) HRSA does **not** require prior authorization;
- For **clients with developmental disabilities** (regardless of age) HRSA does **not** require prior authorization.

## Back-up Eyeglasses [Refer to WAC 388-544-0300 (7)]

HRSA covers one pair of back-up eyeglasses when contact lenses are medically necessary and the contact lenses are the client's primary visual correction aid (see Contact Lenses, page C.11). HRSA limits back-up eyeglasses as follows:

- For **adults** (clients 21 years or older): Once every 6 years.
- For **children** (clients 20 years or younger): Once every 2 years.
- For **clients with developmental disabilities** (regardless of age): Once every 2 years.

# Coverage – Plastic Eyeglass Lenses and Services

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## When does HRSA cover eyeglass lenses and services?

[Refer to WAC 388-544-0350 (1)]

HRSA covers the following plastic scratch-resistant eyeglass lenses:

- Single vision lenses;
- Round or flat top D-style bifocals;
- Flat top trifocals; and
- Slab-off and prism lenses (including Fresnel lenses).

**Note:** HRSA's contractor supplies **all** plastic eyeglass lenses with a scratch-resistant coating.

## Replacing Bifocal or Trifocal Eyeglass Lenses

[Refer to WAC 388-544-0350 (2)]

HRSA allows bifocal eyeglass lenses to be replaced with trifocal or single vision lenses, or trifocal lenses to be replaced with bifocals or single vision lenses when all of the following apply:

- A client has attempted to adjust to the bifocals or trifocals for at least 60 days;
- The client is unable to make the adjustment; and
- The bifocal or trifocal lenses being replaced are returned to the provider.

**The Vision Care Fee Schedule (previously found on pages F.1 – F.6) is now located in the appendix. To view or download the Fee Schedule, click [Appendix](#).**

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**Health & Recovery Services Administrat**  
**Vision Care Program**  
**Effective July 1, 2006**

Code Status Indicator	Code	Mod	Maximum Allowable NFS	Maximum Allowable FS	PA?
<b>Payable to Ophthalmologists, Optometrists and Opticians</b>					
R	92070		\$41.50	\$24.08	
R	92340		\$25.00	\$25.00	LE
R	92352		\$24.54	\$24.54	
R	92341		\$28.21	\$28.21	LE
R	92342		\$30.05	\$30.05	LE
R	92353		\$28.90	\$28.90	
R	92354		\$210.73	\$210.73	PA
R	92370		\$20.64	\$10.78	
R	92371		\$14.90	\$14.90	
R	92499		B.R.	B.R.	
<b>Payable to Ophthalmologists and Optometrists Only</b>					
R	92002		\$43.34	\$28.66	
R	92004		\$79.11	\$55.26	
R	92012		\$39.90	\$22.70	
R	92014		\$58.93	\$36.92	LE
R	92015		\$44.03	\$12.38	LE
R	92018		\$83.92	\$83.92	
R	92019		\$43.80	\$43.80	
R	92020		\$16.74	\$12.38	
R	92060		\$33.48	\$33.48	
R	92060	26	\$23.16	\$23.16	
R	92060	TC	\$10.55	\$10.55	
	92065		#	#	
	92065	26	#	#	
	92065	TC	#	#	
R	92081		\$30.73	\$30.73	
R	92081	26	\$11.92	\$11.92	
R	92081	TC	\$18.80	\$18.80	
R	92082		\$39.44	\$39.44	
R	92082	26	\$14.68	\$14.68	
R	92082	TC	\$24.54	\$24.54	
R	92083		\$45.40	\$45.40	
R	92083	26	\$16.97	\$16.97	
R	92083	TC	\$28.66	\$28.66	
R	92100		\$53.20	\$30.04	
R	92120		\$44.25	\$26.60	
R	92130		\$49.07	\$27.75	
R	92135		\$27.06	\$27.06	
R	92135	26	\$11.69	\$11.69	
R	92135	TC	\$15.13	\$15.13	
R	92136		\$52.74	\$52.74	
R	92136	26	\$18.34	\$18.34	
R	92136	TC	\$34.40	\$34.40	

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Code Status Indicator	Code	Mod	Maximum Allowable NFS	Maximum Allowable FS	PA?
R	92140		\$34.85	\$16.74	
R	92225		\$13.99	\$12.61	
R	92226		\$12.61	\$11.01	
R	92230		\$50.22	\$18.80	
R	92235		\$81.63	\$81.63	
R	92235	26	\$27.75	\$27.75	
R	92235	TC	\$53.89	\$53.89	
R	92240		\$170.60	\$170.60	
R	92240	26	\$37.61	\$37.61	
R	92240	TC	\$132.99	\$132.99	
R	92250		\$46.32	\$46.32	
R	92250	26	\$14.68	\$14.68	
R	92250	TC	\$31.64	\$31.64	
R	92260		\$11.01	\$6.88	
R	92265		\$54.80	\$54.80	
R	92265	26	\$25.91	\$25.91	
R	92265	TC	\$28.89	\$28.89	
R	92270		\$55.49	\$55.49	
R	92270	26	\$27.06	\$27.06	
R	92270	TC	\$28.66	\$28.66	
R	92275		\$69.71	\$69.71	
R	92275	26	\$33.94	\$33.94	
R	92275	TC	\$35.77	\$35.77	
R	92283		\$24.08	\$24.08	
R	92283	26	\$5.73	\$5.73	
R	92283	TC	\$18.34	\$18.34	
R	92284		\$50.22	\$50.22	
R	92284	26	\$7.57	\$7.57	
R	92284	TC	\$42.65	\$42.65	
R	92285		\$28.20	\$28.20	
R	92285	26	\$6.88	\$6.88	
R	92285	TC	\$21.32	\$21.32	
R	92286		\$87.82	\$87.82	
R	92286	26	\$22.47	\$22.47	
R	92286	TC	\$65.35	\$65.35	
R	92287		\$75.21	\$26.37	
R	92310		\$53.89	\$38.29	
R	92311		\$51.13	\$33.71	
R	92312		\$55.03	\$41.27	
R	92313		\$46.55	\$28.43	
R	92355		\$102.04	\$102.04	PA
R	V2623		\$862.80	\$862.80	
R	V2624		\$65.09	\$65.09	
R	V2625		\$395.77	\$395.77	
R	V2626		\$213.33	\$213.33	
R	V2627		\$1,377.82	\$1,377.82	
R	V2628		\$325.33	\$325.33	
R	V2630		\$342.42	\$342.42	
R	V2631		\$342.42	\$342.42	
R	V2632		\$342.42	\$342.42	

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Code Status Indicator	Code	Mod	Maximum Allowable NFS	Maximum Allowable FS	PA?
<b>Payable to Opticians Only</b>					
R	92314		\$38.06	\$22.47	
R	92315		\$30.50	\$14.22	
R	92316		\$37.38	\$22.93	
R	92317		\$32.56	\$13.99	
R	V2799	TT	\$17.18	\$17.18	

#### **Status Indicators**

D = Discontinued Code  
N = New Code  
P = Policy Change  
R = Rate Update  
# Not Covered in this program

#### **Legend**

PA= Written Fax Prior Auth  
EPA = Expedited Prior Auth  
LE = Limitation Extension  
B.R. = By Report  
A.C. = Acquisition Cost

**tion (HRSA)**

[Link To Legend For Code Status Indicator](#)

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**Comments**
